

**Doggy Day Care / Socialized Play Application**

**Date of Orientation** \_\_\_\_\_

**OWNER INFO**

Owner Name \_\_\_\_\_ (Skip the rest of this section if current customer)  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone Number \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Which Number(s) Can We Contact In Case Of Emergency? \_\_\_\_\_  
Email Address \_\_\_\_\_  
Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Persons authorized to Drop Off / Pick Up my dog(s) \_\_\_\_\_

**DOG INFO**

Dog Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Weight \_\_\_\_\_ lb.  
Breed \_\_\_\_\_ Sex: \_\_ Male \_\_ Female Color \_\_\_\_\_  
Yes, my dog is \_\_ Spayed \_\_ Neutered \_\_ No, my dog is not spayed or neutered  
**Males 6 months and older must be neutered. Females may not attend while in heat.**  
Can your dog have peanut butter? \_\_ No \_\_ Yes

Veterinarian \_\_\_\_\_ Phone \_\_\_\_\_

**Vaccination Reminder: All dogs MUST be current on Rabies, Distemper, and Bordetella.**

Is your dog taking any medications? \_\_ No \_\_ Yes (Please list all medications)

Medication \_\_\_\_\_ Quantity \_\_\_\_\_ \_\_ AM \_\_ Afternoon \_\_ PM  
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Medication \_\_\_\_\_ Quantity \_\_\_\_\_ \_\_ AM \_\_ Afternoon \_\_ PM

**DOG BEHAVIOR**

What do you hope your pet will get from the day care program? \_\_\_\_\_

• Is there any PERSON, type of DOG, or SITUATION your dog may have a problem with?  
\_\_ No \_\_ Yes If Yes, explain \_\_\_\_\_

• How long have you had your dog? \_\_\_\_\_

• Where did you get your dog? \_\_\_\_\_

• Has your dog ever growled or bit another person or dog? \_\_ No \_\_ Yes

What were the circumstances? \_\_\_\_\_

• Can you take a food item away from your dog without him or her growling? \_\_ Yes \_\_ No

• Will your dog share toys with other dogs? \_\_ Yes \_\_ No

• Has your dog ever jumped a fence or barrier? \_\_ Yes \_\_ No

• Are there areas on your dog's body where they do not liked to be touched? \_\_ Yes \_\_ No

If Yes, explain \_\_\_\_\_

• Has your dog ever socialized with a large group of dogs? (8 or more) \_\_ Yes \_\_ No

• Has your dog ever played with dogs over 15 pounds? \_\_ Yes \_\_ No

• Has your dog ever played with dogs less than 15 pounds? \_\_ Yes \_\_ No

• Are there any restrictions that should be placed on your dog's activities? \_\_ Yes \_\_ No

If Yes, explain \_\_\_\_\_

What else should we know about our future day care dog? \_\_\_\_\_

I, the undersigned, hereby acknowledge and agree that all the information provided in this application is complete and accurate to the best of my knowledge. I further acknowledge and agree that I have read, understand and agree to all terms and conditions contained in Stone Mountain Pet Lodge Policies, Procedures, and SMPL Release. Waiver of Liability, Assumption of Risk and Indemnification Agreement (the Agreement), as they may be amended from time to time, which are attached and fully incorporated into this application. I hereby execute the Agreement for my dog, myself, and my heirs, successors, representatives, and assigns. I further attest that if I am not the sole owner or representatives of the dog subject to this application, that my signature is sufficient to enter into this Agreement for and on my behalf of any other owner or representative.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_

Initial \_\_\_\_\_ Date \_\_\_\_\_

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